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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF MISSISSIPPI		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.		First name Elane Middle name Everett Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years Include your married or maiden names.	Tracey Body Everett		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2269		

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Debtor 1 **Tracey Elane Everett**

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	865 Washington Street Grenada, MS 38901	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Grenada County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Case number (if known) Tracey Elane Everett Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. Northern District of When 1/03/01 Case number 01-10022 District MS When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When District Case number, if known Debtor Relationship to you When Case number, if known District Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

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Case number (if known) Debtor 1 Tracey Elane Everett Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Tracey Elane Everett

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Dei	iracey Elane Eve	rett			Jei (if known)		
Par	t 6: Answer These Quest	ions for Re	porting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you o	owe that are not consumer debts or busing	ess debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt provailable to distribute to unsecured creditor	operty is excluded and administrative expenses s?		
	administrative expenses		■ No				
	are paid that funds will be available for		□Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		5 001-10,000	5 0,001-100,000		
		☐ 100-19 ☐ 200-99	· -	☐ 10,001-25,000	☐ More than100,000		
19.	How much do you	■ \$0 - \$5	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	\$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million	☐ \$100,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$5	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
Par	t 7: Sign Below						
For	you	I have exa	amined this petition, and I ded	clare under penalty of perjury that the info	rmation provided is true and correct.		
			have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, ited States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
			attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this iment, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request	quest relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		bankrupto and 3571	y case can result in fines up	, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519		
		Tracey I	ey Elane Everett Elane Everett of Debtor 1	Signature of Deb	tor 2		
		Executed					
			MM / DD / YYYY	M	M / DD / YYYY		

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Debtor 1 Tracey Elane Everett Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Tarik Johnson Signature of Attorney for Debtor	Date	September 23, 2019
,		WINT DD / TTTT
Tarik Johnson 100354		
Printed name		
JOHNSON & JOHNSON		
Firm name		
35 FIRST STREET		
POST OFFICE BOX 1044		
Grenada, MS 38902-1044		
Number, Street, City, State & ZIP Code		
Contact phone (662) 226-0782	Email address	tarikjohnson@bellsouth.net
100354 MS		
Bar number & State		

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			Document	Page 8 of 60		
Fill	in this infor	mation to identify your	case:			
Deb	otor 1	Tracey Elane Eve	rett			
Dak	otor 2	First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF M	IISSISSIPPI		
	se number lown)				_	if this is an
Su Be a	mmary on second complete mation. Fill	and accurate as possib	le. If two married people are fi	Certain Statistical Information ling together, both are equally responsible formation on this form. If you are filing amend poox at the top of this page.	or supplyin	
Par	t 1: Summ	narize Your Assets				
					Your as	ssets of what you own
1.	Schedule A 1a. Copy lir	VB: Property (Official Fone 55, Total real estate, for	orm 106A/B) rom Schedule A/B		\$	0.00
	1b. Copy lir	ne 62, Total personal pro	perty, from Schedule A/B		\$	29,450.00
	1c. Copy lir	ne 63, Total of all propert	y on Schedule A/B		\$	29,450.00
Par	t 2: Summ	narize Your Liabilities				
						abilities t you owe
2.			laims Secured by Property (Officent A, Amount of claim, at the bo	ial Form 106D) ittom of the last page of Part 1 of <i>Schedule D</i>	\$	47,735.77
3.			Unsecured Claims (Official Form 1 (priority unsecured claims) from	n 106E/F) m line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy tl	ne total claims from Part	2 (nonpriority unsecured claims)	from line 6j of Schedule E/F	\$	18,143.00
				Your total liabilities	\$	65,878.77
Par	t 3: Summ	narize Your Income and	Expenses			
4.		Your Income (Official Fo			\$	1,925.47
5.	Schedule J Copy your i	: Your Expenses (Official monthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>		\$	1,919.00
Par	t 4: Answ	er These Questions for	Administrative and Statistical	Records		
6.	-	•	er Chapters 7, 11, or 13? on this part of the form. Check t	his box and submit this form to the court with yo	ur other sch	nedules.

- Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Tracey Elane Everett

Case number (if known)

8.	8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form				
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$_			

\$_____1,379.89

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Document	Page 10 of 60		
Fill in this info	rmation to identify your case	e and this filing:			
Debtor 1	Tracey Elane Everett				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
-					
United States E	Bankruptcy Court for the: NO	RTHERN DISTRICT OF M	1551551771		
Case number			<u> </u>		☐ Check if this is an
					amended filing
Official F	orm 106A/B				
Schedu	le A/B: Proper	tv			12/15
	, separately list and describe iter		If an asset fits in more than o	one category, list the asset in	
	Be as complete and accurate as ore space is needed, attach a se estion.				
Part 1: Describ	e Each Residence, Building, Lar	nd, or Other Real Estate You	Own or Have an Interest In		
	<u> </u>	·			
. Do you own o	r have any legal or equitable inte	erest in any residence, buildir	ig, land, or similar property?		
No. Go to P	art 2.				
☐ Yes. Where	e is the property?				
Part 2: Describ	e Your Vehicles				
□ No ■ Yes	Observator			Do not deduct secured cla	aims or exemptions. Put
3.1 Make:	Chevrolet	- <u>-</u>	the property? Check one	the amount of any secure	d claims on Schedule D:
Model:	Impala	Debtor 1 only		Creditors Who Have Clair	ns Secured by Property.
Year:	2016 ate mileage: 61000	_ □ Debtor 2 only □ Debtor 1 and Debtor	2 only	Current value of the entire property?	Current value of the portion you own?
Other info		At least one of the de	•	chare property:	portion you own:
		1		440 545 00	*
		Check if this is com	munity property	\$13,545.00	\$13,545.00
3.2 Make:	Chevrolet	Who has an interest in	the property? Check one	Do not deduct secured cla	
Model:	Impala	Debtor 1 only		the amount of any secure Creditors Who Have Clain	
Year:	2008	Debtor 2 only		Current value of the	Current value of the
Approxim	ate mileage:	☐ Debtor 1 and Debtor	2 only	entire property?	portion you own?
Other info	ormation:	At least one of the de	ebtors and another		
		Check if this is com	imunity property	\$3,555.00	\$3,555.00
1 Watereraft	niraraft mater homes ATVs	and other represtional ve	hiolog other vehicles on	d acceptant	
	aircraft, motor homes, ATVs pats, trailers, motors, personal				
•	. , , , , , , , , , , , , , , , , , , ,	, 5	, ,		
■ No					
☐ Yes					

Official Form 106A/B Schedule A/B: Property page 1

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5	Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here=>	\$17,100.00
В	Part 3: Describe Your Personal and Household Items	
	Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe	ciaims of exemptions.
	3 beds, couch, love seat, 5 dressers, chest, 2 night stands, coffee table, microwave, kitchen table with 4 chairs	\$1,500.00
7.	 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games □ No ■ Yes. Describe 	collections; electronic devices
		£400.00
_	3 televisions, cell phone, dvd player	\$100.00
	 Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coir other collections, memorabilia, collectibles No Yes. Describe Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments 	
	■ No □ Yes. Describe	
10	 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No □ Yes. Describe 	
11	 Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe 	
	Personal clothing	\$150.00
	 2. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, No Yes. Describe 3. Non-farm animals Examples: Dogs, cats, birds, horses No 	gold, silver
	☐ Yes. Describe	
14	4. Any other personal and household items you did not already list, including any health aids you did not list No	
Oi	☐ Yes. Give specific information fficial Form 106A/B Schedule A/B: Property	page 2

Debtor 1

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De	ebtor 1 Tracey	Elane Everett	Case number (if known)
15		value of all of your entries from lethat number here	Part 3, including any entries for pages you have attached	\$1,750.00
Pa	art 4: Describe You	r Financial Assets		
		e any legal or equitable interest in	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	ey you have in your wallet, in your h	nome, in a safe deposit box, and on hand when you file your peti	tion
17.	•	king, savings, or other financial acc	counts; certificates of deposit; shares in credit unions, brokerage ts with the same institution, list each.	houses, and other similar
	☐ Yes		Institution name:	
18.		l de de	rokerage firms, money market accounts	
19.			porated and unincorporated businesses, including an intere	est in an LLC, partnership, and
	■ No			
	☐ Yes. Give spec	cific information about them Name of entity:	% of ownership:	
20.	Negotiable instru Non-negotiable i	uments include personal checks, ca	otiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
	■ No □ Yes. Give spec	ific information about them Issuer name:		
21.	Retirement or per Examples: Intere		403(b), thrift savings accounts, or other pension or profit-sharing	g plans
	Yes. List each	account separately. Type of account:	Institution name:	
		Pension	PERS	\$600.00
 22.	Your share of all Examples: Agree	ts and prepayments unused deposits you have made s	so that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications compa	<u> </u>
	■ No □ Yes		Institution name or individual:	
23.	Annuities (A con		ney to you, either for life or for a number of years)	
	■ No □ Yes	Issuer name and description.		
24.	26 U.S.C. §§ 530(ducation IRA, in an account in a (b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition p	ogram.
	■ No □ Yes	Institution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c	s):

Official Form 106A/B Schedule A/B: Property page 3

Case 19-13837-JDW Doc 1 Filed 09/23/19 Entered 09/23/19 20:08:28 Page 13 of 60 Document Case number (if known) Debtor 1 **Tracey Elane Everett** 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements $\hfill \square$ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... **Income Tax Refund Federal** \$5,000.00 Income Tax Refund State \$5,000.00 Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

Nο

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

Case 19-13837-JDW Doc 1 Filed 09/23/19 Entered 09/23/19 20:08:28 Page 14 of 60 Document Debtor 1 Case number (if known) **Tracey Elane Everett** ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$10.600.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$17,100.00 57. Part 3: Total personal and household items, line 15 \$1,750.00

58.	Part 4: Total financial assets, line 36	\$10,600.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$29,450.00	Copy personal property total	\$29,450.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$29,450.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this information to identify your case:							
Debtor 1	Tracey Elane Eve	rett					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF MISSISSIPPI				
Case number							
(if known)					☐ Ch		
					am		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	ptions are	you claiming?	Check one only	, even if	your spouse is	s filing with	vou.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
2016 Chevrolet Impala 61000 miles Line from Schedule A/B: 3.1	\$13,545.00	\$0.00	Miss. Code Ann. § 85-3-1(a
Line from Schedule A/D. 3.1		☐ 100% of fair market value, up to any applicable statutory limit	
2008 Chevrolet Impala Line from Schedule A/B: 3.2	\$3,555.00	\$2,555.00	Miss. Code Ann. § 85-3-1(a
Ellie Holli Schedule A/B. 3.2		100% of fair market value, up to any applicable statutory limit	
3 beds, couch, love seat, 5 dressers, chest, 2 night stands, coffee table,	\$1,500.00	\$1,500.00	Miss. Code Ann. § 85-3-1(a
microwave, kitchen table with 4 chairs Line from Schedule A/B: 6.1		☐ 100% of fair market value, up to any applicable statutory limit	
3 televisions, cell phone, dvd player Line from Schedule A/B: 7.1	\$100.00	\$100.00	Miss. Code Ann. § 85-3-1(a
Line Holli Schedule A/B. 1.1		100% of fair market value, up to any applicable statutory limit	
Personal clothing Line from Schedule A/B: 11.1	\$150.00	\$150.00	Miss. Code Ann. § 85-3-1(a
LINE HOLL SCHEUULE AV.D. 11.1		100% of fair market value, up to any applicable statutory limit	

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Tracey Elane Everett Case number (if known)

Pension: PERS Line from Schedule A/B: 21.1 Federal: Income Tax Refund Line from Schedule A/B: 28.1 State: Income Tax Refund Line from Schedule A/B: 28.2	Current value of the portion you own Copy the value from Schedule A/B \$600.00		\$600.00 100% of fair market value, up to any applicable statutory limit \$5,000.00	Specific laws that allow exemption Miss. Code Ann. § 85-3-1(e) Miss. Code Ann. § 85-3-1(j)
Line from Schedule A/B: 21.1 Federal: Income Tax Refund Line from Schedule A/B: 28.1 State: Income Tax Refund	\$600.00	-	\$600.00 100% of fair market value, up to any applicable statutory limit \$5,000.00 100% of fair market value, up to	
Line from Schedule A/B: 21.1 Federal: Income Tax Refund Line from Schedule A/B: 28.1 State: Income Tax Refund		•	100% of fair market value, up to any applicable statutory limit \$5,000.00 100% of fair market value, up to	
Federal: Income Tax Refund Line from Schedule A/B: 28.1 State: Income Tax Refund	\$5,000.00	•	\$5,000.00 100% of fair market value, up to	Miss. Code Ann. § 85-3-1(j)
Line from Schedule A/B: 28.1 State: Income Tax Refund	\$5,000.00		100% of fair market value, up to	Miss. Code Ann. § 85-3-1(j)
State: Income Tax Refund				
			arry applicable statutory limit	
	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(k)
Line Horri Schedule Avb. 20.2			100% of fair market value, up to any applicable statutory limit	

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Elliste data terramentary to the other drawn	IT 00001			
Fill in this information to identify you	ii case.			
Debtor 1 Tracey Elane Ev	verett			
First Name	Middle Name Last Name		-	
Debtor 2			_	
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the	NORTHERN DISTRICT OF MISSISSIPPI			
			-	
Case number (if known)			☐ Check	if this is an
				led filing
				Ü
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secur	ed by Propert	V	12/15
	If two married people are filing together, both are out, number the entries, and attach it to this form			
number (if known).	,	, , , , , , , , , , , , , , , , , , , ,		
1. Do any creditors have claims secured by	y your property?			
☐ No. Check this box and submit t	his form to the court with your other schedules	. You have nothing else t	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	more than one secured claim, list the creditor separa	Column A	Column B	Column C
for each claim. If more than one creditor has	s a particular claim, list the other creditors in Part 2. A	s Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabeti	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 First Heritage	Describe the property that secures the claim:	\$2,573.34	\$0.00	\$2,573.34
Creditor's Name	household goods	1		
	As of the date you file, the claim is: Check all that			
1320 B. Sunset Drive	apply.			
Grenada, MS 38901	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	☐ An agreement you made (such as mortgage or	secured		
Debtor 1 only	car loan)	secureu		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit	1		
☐ Check if this claim relates to a	•	chase Money Securi	ty	
community debt		<u> </u>	-	
Date debt was incurred 2018	Last 4 digits of account number			
2010				
2.2 Guaranty Bank	Describe the property that secures the claim:	\$1,000.00	\$3,555.00	\$0.00
Creditor's Name	2008 Chevrolet Impala	Ψ1,000.00	Ψ5,555.00	Ψ0.00
	2000 Onoviolet impala			
1324 Sunset Drive	As of the data was file the alaim in O. I. I. I. I.			
Suite C	As of the date you file, the claim is: Check all that apply.			
Grenada, MS 38901	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the debt? Oheads are	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.	and word		
Debtor 1 only	☐ An agreement you made (such as mortgage or car loan)	securea		
Debtor 2 only				
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien))		
☐ At least one of the debtors and another☐ Check if this claim relates to a	Judgment lien from a lawsuit	e Money Security		
community debt	Other (including a right to offset)	o money occurry		
Date debt was incurred 2016	Last 4 digits of account number			

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Debtor 1 Tracey Elane Everett		Case number (if known)		
First Name Middle N	lame Last Name	,		
2.3 Kirk Brothers Pre-Owned	Describe the property that secures the claim:	\$2,074.00	\$0.00	\$2,074.00
Creditor's Name	vehilce			
P.O. Box 2360	As of the date you file, the claim is: Check all that			
Grenada, MS 38902	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Hamber, Greek, Oky, State & Zip Gode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Purchase	Money Security		
Date debt was incurred 2017	Last 4 digits of account number			
Nissan Motor				•
Acceptance Corporation	Describe the property that secures the claim:	\$17,000.00	\$0.00	\$17,000.00
Creditor's Name	2017 Nissan Sentra			
Pankeuntau Danaetmant				
Bankruptcy Department P.O. Box 660366	As of the date you file, the claim is: Check all that			
Dallas, TX 75266-0366	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Purchase	Money Security		
Date debt was incurred 2018	Last 4 digits of account number 0001	<u> </u>		
2.5 OneMain Financial	Describe the property that secures the claim:	\$20,000.00	\$13,545.00	\$6,455.00
Creditor's Name	2016 Chevrolet Impala 61000 miles			
	As of the date you file, the claim is: Check all that			
363 East Monroe	apply.			
Grenada, MS 38901	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or s	secured		
☐ Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Purchase	e Money Security		
Date debt was incurred 2019	Last 4 digits of account number			

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Debt	or 1 Tracey Elane Everett			Case number (if known)		
	First Name Middle N	ame Last Name	_			
2.6	Republic Finance, Inc.	Describe the property that secures	the eleims	\$1,578.43	\$0.00	\$1,578.43
2.0	Creditor's Name		uie ciaiii.	31,376.43	\$0.00	ψ1,376.43
	1795 South Commerce	household goods				
	Street					
	P.O. Box 1025	As of the date you file, the claim is:	Check all that			
	Grenada, MS 38902	apply. Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
	,,,,,	☐ Disputed				
Who	owes the debt? Check one.	Nature of lien. Check all that apply.				
D D	ebtor 1 only	☐ An agreement you made (such as	mortgage or	secured		
_	ebtor 2 only	car loan)	3.3.			
_	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	ahania'a lian\			
	t least one of the debtors and another	☐ Judgment lien from a lawsuit	criariic's lieri)			
□с	heck if this claim relates to a community debt	Other (including a right to offset)	Non-Pur	chase Money Security		
Date	debt was incurred 2017	Last 4 digits of account num	ber			
2.7	Tower Loan of Grenada	Describe the property that secures	the claim:	\$3,510.00	\$0.00	\$3,510.00
	Creditor's Name	household goods		1		-
		As of the date you file, the claim is:	Ob 1 - 11 4b - 4	J		
	P.O. Box 1296	apply.	Check all that			
	Grenada, MS 38902	☐ Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who	owes the debt? Check one.	Nature of lien. Check all that apply.				
■ D	ebtor 1 only	An agreement you made (such as	mortgage or	secured		
□D	ebtor 2 only	car loan)				
	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ Af	t least one of the debtors and another	☐ Judgment lien from a lawsuit				
	heck if this claim relates to a community debt	Other (including a right to offset)	Non-Pur	chase Money Security		
Date	debt was incurred 2019	Last 4 digits of account num	ber			
Δd	d the dollar value of your entries in C	olumn A on this page. Write that num	her here	\$47,735.77		
		the dollar value totals from all pages				
Wr	ite that number here:	, -		\$47,735.77		
Part	2. List Others to Be Notified to	r a Debt That You Already Listed	l			
		•				
trying than	g to collect from you for a debt you o	e notified about your bankruptcy for we to someone else, list the creditor you listed in Part 1, list the additional is page.	in Part 1, and	d then list the collection agency he	re. Similarly, if yo	u have more
	Name, Number, Street, City, State & 2		On w	which line in Part 1 did you enter the c	reditor? _2.6_	
	Grenada County Circuit Co	urt				
	P.O. Box 1517 Granada MS 38002-1517		Last	4 digits of account number		
	Grenada, MS 38902-1517					
_	Name, Number, Street, City, State & 2		On v	which line in Part 1 did you enter the c	reditor? 2.3	
	Grenada County Justice Co 16 First Street	our t	Loot	A digits of account number		
	Grenada, MS 38901		LaSi	4 digits of account number		

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Debt	or 1 Tracey Elane	Everett		Case number (if known)
	Name, Number, Street, Grenada County		Last Name	On which line in Part 1 did you enter the creditor? 2.7
	16 First Street Grenada, MS 3890			Last 4 digits of account number
	Name, Number, Street, Grenada County of 16 First Street Grenada, MS 389	Justice Court		On which line in Part 1 did you enter the creditor? Last 4 digits of account number
	Name, Number, Street, Nissan Motor Acc Bankruptcy Depa P.O. Box 660360 Dallas, TX 75266-	eptance Corporation rtment		On which line in Part 1 did you enter the creditor?
	Name, Number, Street, Zarzaur & Schwar Attorneys at Law P.O. Box 11366 Birmingham, AL	rtz, P.C.		On which line in Part 1 did you enter the creditor? 2.6 Last 4 digits of account number

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		Document	t Page 2	21 of 60	
Fill in this info	rmation to identify your	case:			
Debtor 1	Tracey Elane Eve	rett			
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	sankruptcy Court for the:	NORTHERN DISTRICT O	F MISSISSIPPI		
Case number					
(if known)					Check if this is an
					amended filing
Official For	m 106E/E				
		ha Haya Unaasiir	ad Claima		12/15
		ho Have Unsecur		d Part 2 for creditors with NONPRIORITY cla	
Schedule G: Exec Schedule D: Cred left. Attach the Co	cutory Contracts and Unexp litors Who Have Claims Sec	red Leases (Official Form 106 ured by Property. If more space	G). Do not includ ce is needed, cop	y contracts on Schedule A/B: Property (Office any creditors with partially secured claim by the Part you need, fill it out, number the et, do not file that Part. On the top of any add	ns that are listed in entries in the boxes on the
Part 1: List	All of Your PRIORITY Un	secured Claims			
1. Do any cred	itors have priority unsecure	d claims against you?			
No. Go to	Part 2.				
☐ Yes.					
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any cred	itors have nonpriority unsec	ured claims against you?			
☐ No. You h	nave nothing to report in this pa	art. Submit this form to the court	t with your other so	chedules.	
Yes.					
unsecured cl	aim, list the creditor separately	for each claim. For each claim	listed, identify wha	rho holds each claim. If a creditor has more that type of claim it is. Do not list claims already in an three nonpriority unsecured claims fill out th	ncluded in Part 1. If more
					Total claim
4.1 Ameri	can Cash	Last 4 digits o	of account numbe	er	\$304.88
Nonprio	rity Creditor's Name			 -	
	Commerce Street	When was the	debt incurred?	2019	_
	da, MS 38901 Street City State Zip Code	As of the date	you file the clair	n is: Check all that apply	
	curred the debt? Check one.	710 of the date	you mo, mo olum	in it. On ook all that apply	
■ Debt	or 1 only	☐ Contingent			
☐ Debt	or 2 only	☐ Unliquidated	d		
☐ Debt	or 1 and Debtor 2 only	☐ Disputed			
	ast one of the debtors and and		RIORITY unsecur	red claim:	
	ck if this claim is for a comm		ns		
debt		☐ Obligations		paration agreement or divorce that you did not	
_	aim subject to offset?	report as priorit	•		
No		•	·	ring plans, and other similar debts	
☐ Yes		Other. Spec	check adv	vance	_

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Tracey Elane Everett	Case number (if known)	
Armstrong & Associates Nonpriority Creditor's Name	Last 4 digits of account number	\$116.00
P.O. Box 1787	When was the debt incurred? 2017	
Mobile, AL 36633 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify medical bill	
Baptist Memorial Hospital	Last 4 digits of account number	\$2,407.69
Nonpriority Creditor's Name P.O. Box 17127 Memphis, TN 38187	When was the debt incurred? 2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify medical bill	
C-Spire Wireless	Last 4 digits of account number	\$143.20
Nonpriority Creditor's Name 1018 Highland Colony Parkway Suite 300	When was the debt incurred? 2017	
Ridgeland, MS 39157 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify cell phone	

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Debt	or 1 Tracey Elane Everett	Case number (if known)	
4.5	Capital One	Last 4 digits of account number 1315	\$1,000.00
	Nonpriority Creditor's Name Bankruptcy Claims Servicer P.O. Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred? 2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.6	Cash Depot	Last 4 digits of account number	\$344.00
'	Nonpriority Creditor's Name 1756 D South Commerce Street Grenada, MS 38901	When was the debt incurred? 2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify check advance	
4.7	Cash Depot	Last 4 digits of account number	\$344.00
	Nonpriority Creditor's Name 1756 D South Commerce Street Grenada, MS 38901	When was the debt incurred? 2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify	
	□ 1€3	Other. Specify	

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Debtor	1 Tracey Elane Everett	Case number (if known)				
4.8	Comenity Bank/Goody's Bankruptcy Dept.	Last 4 digits of account number 82	24	\$1,113.80		
	Nonpriority Creditor's Name P.O. Box 182125			4 1, 1 1 1 1 1		
	Columbus, OH 43218-2125					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Cl	neck all that apply			
	<u> </u>					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured clai	m:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation report as priority claims	n agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing pla	ns, and other similar debts			
	Yes	Other. Specify Credit card pur	chases			
4.9	Community Choice	Last 4 digits of account number		\$270.00		
	Nonpriority Creditor's Name 1302 Sunset Drive Suite B2	When was the debt incurred? 20	19			
	Grenada, MS 38901					
	Number Street City State Zip Code	As of the date you file, the claim is: Cl	neck all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured clai	m:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation report as priority claims	n agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing pla	ns, and other similar debts			
	Yes	Other. Specify check advance				
4.1	Credit One Bank			\$1,136.72		
0	Nonpriority Creditor's Name	Last 4 digits of account number		φ1,130.7Z		
	P.O. Box 98873 Las Vegas, NV 89193	When was the debt incurred? 20	17			
	Number Street City State Zip Code	As of the date you file, the claim is: Cl	neck all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	m:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation	n agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	25 22			
	■ No	Debts to pension or profit-sharing pla	ns, and other similar debts			
	Yes	■ Other, Specify Credit card pur	chases			

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Case number (if known)

Debition I Tracey Elane Everett	Case number (if known)	
Credit One Bank	Last 4 digits of account number	\$1,323.32
Nonpriority Creditor's Name P.O. Box 98873	When was the debt incurred? 2017	
Las Vegas, NV 89193 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify	
Downtown Finance, Inc.	Last 4 digits of account number	\$200.00
Nonpriority Creditor's Name 237 S. Main Street	When was the debt incurred? 2017	
Grenada, MS 38901 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date year me, and damine of look an anatoppy	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify promissory note	
.1 Fast Pace Urgent Care Clinic	Last 4 digits of account number 6312	\$39.20
Nonpriority Creditor's Name		
P.O. Box 306244	When was the debt incurred? 2019	
Nashville, TN 37230 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	• , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify medical bill	

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1 Tracey Elane Everett	Case number (if known)	
MediQuik Clinic	Last 4 digits of account number	\$14.64
Nonpriority Creditor's Name P.O. Box 1607	When was the debt incurred? 2016	
Grenada, MS 38902-1607 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dain is. One of all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical bill	
Merrick Bank	Last 4 digits of account number 5452	\$1,754.53
Nonpriority Creditor's Name		* 1,1 0 1100
P.O. Box 9211	When was the debt incurred? 2017	
Old Bethpage, NY 11804 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	76 of the date year me, the stain is. One of all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
Money Tyme Financial	Last 4 digits of account number	\$240.00
Nonpriority Creditor's Name 1221 Sunset Drive	When was the debt incurred? 2019	
Grenada, MS 38901 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other, Specify check advance	

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Tracey Elane Everett Case number (if known)

Debt	or 1 Tracey Elane Everett		Case number (if known)				
4.1	Rapid Cash	Last 4 digits of account number		\$734.40			
<u>·</u>	Nonpriority Creditor's Name 254 South Main Street Suite A	When was the debt incurred?	2018				
	Grenada, MS 38901 Number Street City State Zip Code	te Zip Code As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify check adva	nce				
4.1	Safeco Insurance	Local Addition of account months	3171	\$231.28			
8	Nonpriority Creditor's Name	Last 4 digits of account number		φ231.20			
	P.O. Box 1439 New York, NY 10116	When was the debt incurred?	2019				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	The least one of the debiols and another					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify insurance					
4.1	Seventh Avenue	Last 4 digits of account number	8570	\$265.85			
9	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ200.00			
	1112 7th Ave. Monroe, WI 53566	When was the debt incurred?	2017				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	g plans, and other similar debts					
	☐ Yes	Other Specify catalog pur	chase				

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Case number (if known)

tor 1 Tracey Elane Everett	Case number (if known)	
Speeder Cook		¢4 002 0
Speedee Cash Nonpriority Creditor's Name	Last 4 digits of account number	\$1,002.0
570 Sunset Drive Suite A	When was the debt incurred? 2017	
Grenada, MS 38901		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify check advance	
The University of Mississippi		
Center	Last 4 digits of account number	\$412.1
Nonpriority Creditor's Name P.O. Box 3488, Dept. #05-077 Tupelo, MS 38803	When was the debt incurred? 2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical bill	
The University of Mississippi		\$60.4
Center Nonpriority Creditor's Name	Last 4 digits of account number	Ψ00
P.O. Box 3349 Jackson, MS 39207-3349	When was the debt incurred? 2016	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify medical bill	

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Case number (if known)

Tracey Elane Everett	Case number (if known)	
UMMC Grenada	Last 4 digits of account number	\$266.24
Nonpriority Creditor's Name 960 Avent Drive	When was the debt incurred? 2018	
Grenada, MS 38901 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical bill	
UMMC Grenada	Last 4 digits of account number	\$63.97
Nonpriority Creditor's Name		<u> </u>
960 Avent Drive	When was the debt incurred? 2014	
Grenada, MS 38901 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	•	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify medical bill	
UMMC Grenada	Last 4 digits of account number	\$1,494.00
Nonpriority Creditor's Name 960 Avent Drive Grenada, MS 38901	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify medical bill	

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DCDI	or Tracey Elane Everett		Case Harriber (il known)			
4.2 6	University of Mississippi Medical Center	Last 4 digits of account num	ber	\$2,860.75		
	Nonpriority Creditor's Name P.O. Box 22547 Jackson, MS 39225-2547	When was the debt incurred	? 2017			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cl	aim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	cured claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a report as priority claims	separation agreement or divorce that you did not			
	■ No	<u></u>	haring plans, and other similar debts			
	□ Yes	Other. Specify medica	•			
Part	3: List Others to Be Notified About a De	ebt That You Already Listed				
		•	hat you already listed in Parts 1 or 2. For exampl	e if a collection agency		
is tı hav	rying to collect from you for a debt you owe to s	someone else, list the original credit at you listed in Parts 1 or 2, list the	not you alleady listed in Falts 1 of 2. For example to rin Parts 1 or 2, then list the collection agency additional creditors here. If you do not have add	here. Similarly, if you		
	e and Address	On which entry in Part 1 or Part 2 did	, ·			
	strong & Associates Box 1787	Line 4.23 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Clair			
	bile, AL 36633		■ Part 2: Creditors with Nonpriority Unsecured Claims			
	,	Last 4 digits of account number				
Name	e and Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?			
	strong & Associates	Line 4.26 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Clair	าร		
_	. Box 1787 nile, AL 36633		Part 2: Creditors with Nonpriority Unsecured 0	Claims		
IVIOD	me, AL 30033	Last 4 digits of account number				
Name	e and Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?			
C-Sp	oire Wireless	Line 4.4 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Clair	าร		
	D Lakeland Drive		Part 2: Creditors with Nonpriority Unsecured 0	Claims		
	e 300 rl, MS 39208					
геа	11, W3 39200	Last 4 digits of account number				
Name	e and Address	On which entry in Part 1 or Part 2 did	I you list the original creditor?			
	son Smithfield, LLC	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clair	าร		
	Box 9216		Part 2: Creditors with Nonpriority Unsecured (
Old	Bethpage, NY 11804	Last 4 digits of account number	, ,			
		-				
Name CB1	e and Address	On which entry in Part 1 or Part 2 did Line 4.19 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Clair	20		
	Box 7429	Line 4.10 of (Check one).	Part 2: Creditors with Nonpriority Unsecured Clair			
Miss	soula, MT 59807-7429		Part 2: Creditors with Nonphority Onsecured C	Jaims		
		Last 4 digits of account number				
	e and Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?			
CCS		Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clair			
	. Box 607 wood, MA 02062		Part 2: Creditors with Nonpriority Unsecured 0	Claims		
		Last 4 digits of account number				
Name	e and Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?			
CCS	Payment Processing	Line 4.18 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Clair	าร		
	Box 55126		■ Part 2: Creditors with Nonpriority Unsecured 0	Claims		
DOS.	ton, MA 02205	Last 4 digits of account number				

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Debtor 1 Tr	racey El	ane Everett		Case nu	mber (if known)			
Name and Address Community Choice Financial Dept 757 P.O. Box 4115 Concord, CA 94524		e Financial	On which entry in Part 1 or Part 2 die Line 4.9 of (<i>Check one</i>):	☐ Part 1: 0	Creditors with Priority U			
		4		■ Part 2: 0	Creditors with Nonpriorit	y Unsecured Claims		
			Last 4 digits of account number					
Name and Add Frontline A		rategies	On which entry in Part 1 or Part 2 did Line 4.10 of (<i>Check one</i>):	·	iginal creditor? Creditors with Priority U	nsecured Claims		
2700 Snelli Ste 250	•			■ Part 2: 0	Creditors with Nonpriorit	y Unsecured Claims		
Roseville, I	WIN 551	13	Last 4 digits of account number					
Name and Add Frost-Arne		ction	On which entry in Part 1 or Part 2 did Line 4.4 of (<i>Check one</i>):	-	iginal creditor? Creditors with Priority U	nsecured Claims		
P.O. Box 19				Part 2: 0	Creditors with Nonpriorit	y Unsecured Claims		
Nashville,	IN 3721	19-8988	Last 4 digits of account number		•			
Name and Add Grenada C		ustice Court	On which entry in Part 1 or Part 2 did Line 4.6 of (<i>Check one</i>):		riginal creditor? Creditors with Priority Ur	nsecured Claims		
16 First Str	reet				Creditors with Nonpriorit			
Grenada, N	/IS 3890	1	Last 4 digits of account number					
Name and Add		uctice Court	On which entry in Part 1 or Part 2 die			1011		
16 First Str		ustice Court	Line 4.7 of (Check one):		Creditors with Priority Un Creditors with Nonpriorit			
Grenada, M	IS 3890	1		■ Part 2: 0	creditors with Nonpriorii	y Unsecured Claims		
			Last 4 digits of account number					
Name and Address Grenada County Justice Court			On which entry in Part 1 or Part 2 did Line 4.17 of (<i>Check one</i>):	·	riginal creditor? Creditors with Priority Ur	asecured Claims		
16 First Str	reet		Ento or (oncor onc).		Creditors with Nonpriorit			
Grenada, N	/IS 3890	1	Last 4 digits of account number	ruit 2.	oroditoro with Horiphoni	y chocoured chamb		
Name and Add	dress.		On which entry in Part 1 or Part 2 die	d you list the o	iginal creditor?			
LVNV Fund	ding, LL	.c	Line 4.10 of (Check one):	-	Creditors with Priority U	nsecured Claims		
P.O. Box 10		202.0504		Part 2: 0	Creditors with Nonpriori	y Unsecured Claims		
Greenville,	, SC 290	003-0584	Last 4 digits of account number					
Name and Add			On which entry in Part 1 or Part 2 die					
P.O. Box 10		.0	Line 4.11 of (<i>Check one</i>):	_				
Greenville,		603-0584		■ Part 2: (Creditors with Nonpriorit	y Unsecured Claims		
			Last 4 digits of account number					
Name and Add			On which entry in Part 1 or Part 2 die		-			
UMMC Grenada 960 Avent Drive Grenada, MS 38901			Line 4.2 of (Check one):		Creditors with Priority U			
				■ Part 2: 0	Creditors with Nonpriorit	y Unsecured Claims		
			Last 4 digits of account number					
Part 4: Ac	dd the Aı	mounts for Each Type o	f Unsecured Claim					
	nounts of	certain types of unsecured	l claims. This information is for statisti	ical reporting	purposes only. 28 U.S	C.C. §159. Add the amounts for each		
	_	B		•	Total Clai			
Total	6a.	Domestic support obliga	tions	6a.	\$	0.00		
claims	C h	Toyon and cortain attent	labta you awa tha gavernment	C.L	Φ.	0.00		
from Part 1	6b. 6c.		debts you owe the government onal injury while you were intoxicated	6b. 6c.	\$ \$	0.00		
	6d.	=	unsecured claims. Write that amount he		\$	0.00		

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Debtor 1 T	otor 1 Tracey Elane Everett			ımber (if know	/n)
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
al ms					
Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	18,143.00

18,143.00

6j. Total Nonpriority. Add lines 6f through 6i.

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Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Tracey Elane Eve	erett					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI				
Case number				☐ Check if this is an amended filing			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Documer	ii Page 34 oi c	JU	
Fill in this	s information to identify your	case:			
Debtor 1	Tracey Elane Eve	erett			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI		
Case num	nber				☐ Check if this is an amended filing
	al Form 106H <mark>dule H: Your Cod</mark>	ebtors			12/15
people are fill it out, a your name 1. Do	and number the entries in the e and case number (if known) you have any codebtors? (If	ally responsible for supp boxes on the left. Attach Answer every question.	lying correct information the Additional Page to t	n. If more space is needd his page. On the top of a	ed, copy the Additional Page,
Arizoi 	thin the last 8 years, have you na, California, Idaho, Louisiana				tes and territories include
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in lin Form	e 2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make sui	re you have listed the cr	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The credito Check all schedules that	or to whom you owe the debt at apply:
3.1	Zamiya J. Davis 865 Washington Street Grenada, MS 38901			■ Schedule D, line _ □ Schedule E/F, line □ Schedule G Nissan Motor Accep	e

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Fill	in this information t	to identify your ca	ase:							
Deb	otor 1	Tracey Elan	e Everett			_				
	otor 2 ouse, if filing)					-				
Uni	ted States Bankrup	tcy Court for the	: NORTHERN DISTRIC	CT OF MISSISSIPPI		_				
Case number (If known)				-			Check if this is An amende	ed filing		
							A supplem 13 income		ng postpetitior following date	
0	fficial Form	106I					MM / DD/ `	YYYY		
S	chedule I:	Your Inco	ome							12/15
sup	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not fili r spouse is not filing w On the top of any additi	ng jointly, and your s ith you, do not includ	spouse is de inform	s living nation a	with you, incl bout your sp	ude infor	mation abou nore space is	t your needed,
1.	Fill in your empl information.	oyment		Debtor 1			Debtor	2 or non-f	filing spouse	
	If you have more		Employment status	■ Employed			☐ Empl	oyed		
	attach a separate page with information about additional employers.	Employment status	☐ Not employed			☐ Not €	☐ Not employed			
			Occupation	Teacher Assista	nt					
	Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.		Employer's name	Greenwood Leflore Consolidated						
			Employer's address	School District P.O. Box 1497 Greenwood, MS	38930					
			How long employed t	here? 1 month	1					
Par	t 2: Give De	tails About Mor	nthly Income							
	mate monthly incouse unless you are		ate you file this form. If	you have nothing to re	port for a	any line,	write \$0 in the	space. In	ıclude your no	n-filing
	u or your non-filing e space, attach a s		ore than one employer, co	ombine the information	n for all e	mployer	s for that perso	on on the I	lines below. If	you need
						Fo	r Debtor 1		ebtor 2 or ling spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	1,392.09	\$	N/A	=
3.	Estimate and lis	t monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	-
4	Calculate gross	Income Add lin	ne 2 + line 3		4	\$	1 302 00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Iracey Elane Everett	-	Case	e number (<i>if k</i>	nown)				
				Fo	r Debtor 1			Debtor 2 -filing sp		
	Сор	y line 4 here	4.	\$	1,39	2.09	\$	ming sp	N/A	
5.	List	all payroll deductions:								
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	10	6.02	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			5.29	\$_		N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	: -		0.00	\$		N/A	=
	5d.	Required repayments of retirement fund loans	5d.	\$		0.00	\$		N/A	-
	5e.	Insurance	5e.	\$	9	6.31	\$		N/A	-
	5f.	Domestic support obligations	5f.	\$		0.00	\$		N/A	_
	5g.	Union dues	5g.	_		0.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h.	· -		0.00	+ \$		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	32	7.62	\$		N/A	-
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,06	4.47	\$		N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.	\$_		0.00	\$		N/A	_
	8b.	Interest and dividends	8b.	\$_	(0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	57'	2.00	\$		N/A	
	8d.	Unemployment compensation	8d.	· -		0.00	\$-		N/A	_
	8e.	Social Security	8e.	: -		0.00	\$		N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$_ \$		0.00	\$		N/A	_
	8g.	Pension or retirement income	8g. 8h.			0.00	* + \$		N/A N/A	-
	8h.	Other monthly income. Specify: Son pays for 2008 Impala	011.	+ •	20	9.00	+ \$		N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	86	1.00	\$		N/A	A
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	£	1,925.47	+ \$		N/A =	= \$	1,925.47
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			.,	* -			Ľ –	1,020111
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not	depe availa	ble to	pay expens			Schedule . 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						12.	\$	1,925.47
13.	Doy	you expect an increase or decrease within the year after you file this form	?						Combir nonthl	ned y income
		No. Yes Explain								

Official Form 106l Schedule I: Your Income page 2

	to this information to identify a second					
	in this information to identify your case:					
Deb	Tracey Elane Everett			Chec	k if this is:	
Deb	otor 2			_	An amended filing	ving postpetition chapter
	ouse, if filing)				13 expenses as of t	
	NODTHERNIN	OTDIOT OF MICOICOID		_		
Unit	ted States Bankruptcy Court for the: NORTHERN DI	STRICT OF MISSISSIF	['] PI		MM / DD / YYYY	
1	se number					
(If kr	known)					
\bigcap	fficial Form 106J					
						40/4/
	chedule J: Your Expenses as complete and accurate as possible. If two i	married neonle are filir	ng together, both	are equi	ally responsible fo	12/19
info	ormation. If more space is needed, attach anot mber (if known). Answer every question.					
Par	rt 1: Describe Your Household					
1.	Is this a joint case?					
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate hou.	sehold?				
	□ No	scrioia :				
	☐ Yes. Debtor 2 must file Official Form	106J-2. Expenses for S	Separate Househol	ld of Deb	tor 2.	
•			oparate ricacciio.	0. 200		
2.	Do you have dependents? ☐ No					
	YAS		ependent's relations ebtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.	G	randdaughter		6	■ Yes
						□ No
		So	on		19	Yes
						□ No
						☐ Yes
						□ No
3.	Do your expenses include ■ No.					☐ Yes
0.	expenses of people other than					
	yourself and your dependents?					
Par	rt 2: Estimate Your Ongoing Monthly Exper	ises				
	timate your expenses as of your bankruptcy fil					
	penses as of a date after the bankruptcy is filed plicable date.	d. If this is a suppleme	ental Schedule J,	cneck th	e box at the top of	the form and fill in the
• • •						
	clude expenses paid for with non-cash governi e value of such assistance and have included i					
	fficial Form 106l.)	on Schedule I. Tour I	ncome		Your expe	enses
·	·					
4.	The rental or home ownership expenses for payments and any rent for the ground or lot.	your residence. Includ	e first mortgage	4. \$		400.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or renter's insura	ince		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep e	•		4c. \$		0.00
_	4d. Homeowner's association or condominium			4d. \$		0.00
כ	Additional mortgage payments for your residual	TOUCA CUCh ac home of	auuty Ioane	5 \$		0.00

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1 Irac	ey Elane Everett	Case num	ber (if known)	
ilities:				
	ricity, heat, natural gas	6a.	\$	150.00
			·	50.00
				70.00
			·	0.00
			·	150.00
	. •		*	0.00
			·	0.00
				0.00
	•		·	
	•	11.	Ψ	70.00
		12.	\$	80.00
			·	0.00
			·	0.00
	•	17.	Ψ	0.00
		15a.	\$	124.00
				0.00
			·	0.00
			·	0.00
	· ·		·	0.00
	The morado taxoo doddotod from your pay or moradod in into 4 or 20.	16.	\$	0.00
	t or lease payments:		•	0.00
		17a.	\$	536.00
	•		·	289.00
			*	0.00
			·	0.00
	· · ·		Ψ	0.00
		18.	\$	0.00
			\$	0.00
ecify:		19.		
her real i	property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
				0.00
b. Real	estate taxes	20b.	\$	0.00
c. Prope	erty, homeowner's, or renter's insurance	20c.	\$	0.00
		20d.	\$	0.00
		20e.	\$	0.00
			·	0.00
	<u> </u>		· Ψ	0.00
•	·			
a. Add lin	nes 4 through 21.		\$	1,919.00
b. Copy li	ine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
c. Add lin	e 22a and 22b. The result is your monthly expenses.		\$	1,919.00
			_ ·	.,0.0.00
,	•		_	_
				1,925.47
b. Copy	your monthly expenses from line 22c above.	23b.	-\$	1,919.00
CL.	ract your monthly expenses from your monthly income.	23c.	¢	6.47
		23C.	\$	0.47
	esult is your monthly net income.			
The r	,		form?	
The r	pect an increase or decrease in your expenses within the year after yo	ou file this		ase or decrease because o
The root of you expression of the root of	,	ou file this		ase or decrease because
The root of you expression of the root of	pect an increase or decrease in your expenses within the year after you do you expect to finish paying for your car loan within the year or do you expect you	ou file this		ase or decrease because o
	ilities: . Elect . Wate . Telep . Othe . Ot	ilities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies hildcare and children's education costs othing, laundry, and dry cleaning brisonal care products and services dical and dental expenses ansportation. Include gas, maintenance, bus or train fare. o not include car payments. tetrainment, clubs, recreation, newspapers, magazines, and books haritable contributions and religious donations surance. o not include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance d. Other insurance. Specify: xes. Do not include taxes deducted from your pay or included in lines 4 or 20. elecify: stallment or lease payments: a. Car payments for Vehicle 1 b. Car payments for Vehicle 2 c. Other. Specify: d. Other. Specify: d. Other. Specify: d. Other. Specify: d. Other payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). her payments you make to support others who do not live with you. lecify: her real property expenses not included in lines 4 or 5 of this form or on Sche a. Mortgages on other property b. Real estate taxes c. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses e. Homeowner's association or condominium dues her: Specify:	illities: Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Cother. Specify: dod and housekeeping supplies rothing, laundry, and dry cleaning resonal care products and services dotical and dental expenses ansportation. Include gas, maintenance, bus or train fare. In not include car payments. Itertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations surance. In othiculde insurance deducted from your pay or included in lines 4 or 20. a. Life insurance In the insurance include insurance deducted from your pay or included in lines 4 or 20. b. Health insurance Cother insurance. Specify: Test. Car payments for Vehicle 1 b. Car payments for Vehicle 2 c. Other. Specify: The payments of Vehicle 2 c. Other. Specify: The payments of alimony, maintenance, and support that you did not report as ducted from your pay on include in lines 4 or 5 of this form or on Schedule I: You a. Mortgages on other property Deerify: The real property expenses not included in lines 4 or 5 of this form or on Schedule I: You a. Mortgages on other property Deerify: The real property expenses not included in lines 4 or 5 of this form or on Schedule I: You a. Mortgages on other property Deerify: The real property expenses not included in lines 4 or 5 of this form or on Schedule I: You a. Mortgages on other property Deerify: The real property expenses not included in lines 4 or 5 of this form or on Schedule I: You a. Mortgages on other property Deerify: The real property expenses not included in lines 4 or 5 of this form or on Schedule I: You a. Mortgages on other property Deerify: The real property expenses not included in lines 4 or 5 of this form or on Schedule I: You a. Mortgages on other property Deerify: The result is your morthly expenses. Add lines 4 through 21. Deerify: The result is your morthly expenses. Add lines 22 and 22b. T	ilities: Electricity, heat, natural gas Electricity, heat, n

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Fill in this infor	mation to identify your	case:			
Debtor 1	Tracey Elane Eve				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI		
Case number _ (if known)					☐ Check if this is an amended filing
Official Forr	n 106Dec				
Declarat	ion About a	an Individual	Debtor's Sc	hedules	12/15
obtaining money years, or both. 1		n connection with a bank			ent, concealing property, or or imprisonment for up to 20
Did you pa	y or agree to pay some	eone who is NOT an attor	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes. N	Name of person				ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sum	mary and schedules file	d with this declaration a	and
X /s/ Tra	cey Elane Everett		X		

Signature of Debtor 2

Date

Tracey Elane Everett

Date September 23, 2019

Signature of Debtor 1

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Fill	in this inform	nation to identify you	r case:					
Der	otor 1	Tracey Elane Ev	Middle Name	Last Name				
	otor 2	First Name	Middle None	Last Name				
(Spo	use if, filing)	First Name	Middle Name					
Uni	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF MISSISSIPPI				
	se number					Check if this is an amended filing		
Sta	s complete a	of Financial		are filing together, both are	ankruptcy equally responsible for sup			
		n). Answer every ques Details About Your Ma	stion. arital Status and Where You	Lived Before				
1.		r current marital statu						
	☐ Married■ Not mar	ried						
2.	During the last 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. Lis	NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.						
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
3. state					ity property state or territor ico, Texas, Washington and V			
	■ No □ Yes. Ma	ike sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	fficial Form 106H).				
Par	t 2 Explai	n the Sources of You	r Income					
4.	Fill in the tota	al amount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part-		ndar years?		
	□ No ■ Yes. Fill	in the details.						
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,421.79	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Official Form 107

	se 19-13837-JDW acey Elane Everett	Doc 1 Filed 09 Documen		0/23/19 20:08:28 D	esc Main
116	acey Liane Everett				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calen (January 1 to	dar year: December 31, 2018)	■ Wages, commissions, bonuses, tips	\$10,596.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	dar year before that: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$10,000.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
List each s			you received together, list it or tely. Do not include income th		Gross income
		Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
	1 1 of current year until illed for bankruptcy:	Child Support	\$5,148.00		
For last calen (January 1 to	dar year: December 31, 2018)	Child Support	\$6,864.00		
	dar year before that: December 31, 2017)	Child Support	\$6,864.00		
Part 3: List	Certain Payments You	Made Before You Filed for	Bankruptcv		
-	Debtor 1's or Debtor 2' Neither Debtor 1 nor D individual primarily for a During the 90 days befo No. Go to line 7 Yes List below e paid that cre not include	s debts primarily consume ebtor 2 has primarily consupersonal, family, or househo re you filed for bankruptcy, diach creditor to whom you paieditor. Do not include payments to an attorney for the	r debts? Jumer debts. Consumer debts Id purpose." Id you pay any creditor a total id a total of \$6,825* or more in the for domestic support obligations bankruptcy case.	are defined in 11 U.S.C. § 101 of \$6,825* or more? one or more payments and thations, such as child support and or after the date of adjustment.	ne total amount you nd alimony. Also, do
Yes.		r both have primarily consure you filed for bankruptcy, di	umer debts. id you pay any creditor a total	of \$600 or more?	

■ No. Go to line 7.

es List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

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Deb	tor 1 Tracey Elane Everett	Document	Page 42 of 60 Case number	(if known)
DOD	Tracey Liane Everen			
	Within 1 year before you filed for bankrupi Insiders include your relatives; any general pof which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any on control, or owner of 20%	general partners; partnerships of v % or more of their voting securities	which you are a general partner; corporation s; and any managing agent, including one fo
	■ No□ Yes. List all payments to an insider.			
	Insider's Name and Address	Dates of payment	Total amount Amoun paid stil	t you Reason for this payment I owe
	Within 1 year before you filed for bankruptinsider? Include payments on debts guaranteed or com No Yes. List all payments to an insider		payments or transfer any prope	rty on account of a debt that benefited an
	Insider's Name and Address	Dates of payment	Total amount Amour paid stil	t you Reason for this payment I owe Include creditor's name
Part	4: Identify Legal Actions, Repossessio	ns, and Foreclosures		
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.			
	Case title Case number	Nature of the case	Court or agency	Status of the case
	Kirk Brother's Supercenter vs. Tracy Everette 0054380	Garnishment	Grenada County Justice Court 16 First Street Grenada, MS 38901	Pending ☐ On appeal ☐ Concluded
	Republic Finance, LLC vs. Tracey E. Everett 2019-175	Garnishment	Grenada County Circuit Court P.O. Box 1517 Grenada, MS 38902-151	☐ On appeal
	1st Heritage Credit vs. Tracey E. Everett 0054250	Garnishment	Grenada County Justice Court 16 First Street Grenada, MS 38901	Pending ☐ On appeal ☐ Concluded
•	Tower Loan of Grenada	Garnishment	Grenada County Justice Court	Pending ☐ On appeal

Tracey Everett

Tracy Everette

Cash Depot of MS

0054692

0054713

0054605

Rapid Cash

Tracey Everett

vs.

vs.

Garnishment

Garnishment

16 First Street

16 First Street

16 First Street

Court

Court

Grenada, MS 38901

Grenada, MS 38901

Grenada, MS 38901

Grenada County Justice

Grenada County Justice

☐ Concluded

Pending

☐ On appeal

☐ Concluded

Pending

☐ On appeal

☐ Concluded

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Debtor 1 Tracey Elane Everett Case number (if known)

	•				
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details below		as any of your property repossessed, foreclosed	d, garnished, attache	ed, seized, or levied?
	■ No. Go to line 11. □ Yes. Fill in the information below.				
	Creditor Name and Address	Des	scribe the Property	Date	Value of the
		Exi	plain what happened		property
	Within 00 days before your file of feet bendered		•	- 11411	
11.	accounts or refuse to make a payment be		did any creditor, including a bank or financial in you owed a debt?	stitution, set off any	amounts from your
	Yes. Fill in the details.				
	Creditor Name and Address	Des	scribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or		as any of your property in the possession of an er official?	assignee for the ber	nefit of creditors, a
	■ No □ Yes				
Pai	t 5: List Certain Gifts and Contributions	;			
			lid you give any gifts with a total value of more t	han \$600 per person	2
13.	■ No □ Yes. Fill in the details for each gift.	picy, c	nu you give any girts with a total value of more t	nan 4000 per person	11:
	Gifts with a total value of more than \$600)	Describe the gifts	Dates you gave	Value
	per person Person to Whom You Gave the Gift and		ŭ	the gifts	
	Address:				
14.	Within 2 years before you filed for bankru	ptcy, c	lid you give any gifts or contributions with a total	al value of more than	n \$600 to any charity?
	Yes. Fill in the details for each gift or co	ntributi	ion.		
	Gifts or contributions to charities that to more than \$600	tal	Describe what you contributed	Dates you contributed	Value
	Charity's Name Address (Number, Street, City, State and ZIP Code)				
Par	t 6: List Certain Losses				
15.		tcy or	since you filed for bankruptcy, did you lose any	thing because of the	eft, fire, other disaster
	_				
	■ No □ Yes. Fill in the details.				
		Descri	be any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Include	e the amount that insurance has paid. List pending noe claims on line 33 of <i>Schedule A/B: Property.</i>	loss	lost
Pai	t 7: List Certain Payments or Transfers				
		الم يرمة	d var an annuana alaa astina an waxe babalt naw		
16.	consulted about seeking bankruptcy or p	reparir	d you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require		
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was	Amount of payment
	Email or website address Person Who Made the Payment, if Not Yo	ou		made	

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De	otor 1 Tracey Elane Everett	Document	Page 44 of 6	() ase number	(if known)		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	l value of any prope	rty	Date payment or transfer was made	Amount of payment	
	JOHNSON & JOHNSON 35 FIRST STREET POST OFFICE BOX 1044 Grenada, MS 38902-1044 tarikjohnson@bellsouth.net	Attorney Fees	•		September 13, 2019	\$315.00	
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your credito Do not include any payment or transfer that you No Yes. Fill in the details.	rs or to make paymer			or transfer any prope	rty to anyone who	
	Person Who Was Paid Address	Description and transferred	l value of any prope	rty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankrupter transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial a ade as security (such a y listed on this stateme	ffairs? s the granting of a sent.	curity interes	st or mortgage on you	r property). Do not	
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred		Describe any property or payments received or debts paid in exchange		Date transfer was made	
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		any property to a se	lf-settled tru	ust or similar device	of which you are a	
	Name of trust	Description and	d value of the proper	rty transferr	ed	Date Transfer was made	
Pai	t 8: List of Certain Financial Accounts, Ins	struments, Safe Depo	sit Boxes, and Stora	ige Units			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No						
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer	
	Renasant Bank P.O. Box 709	XXXX-	■ Checking		ay 1, 2019	\$-130.00	

☐ Savings

☐ Money Market☐ Brokerage☐ Other___

Tupelo, MS 38802-0709

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Debtor 1 Tracey Elane Everett

Case number (if known)

21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
		No Yes. Fill in the details.						
	Na	nme of Financial Institution Idress (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	De	scribe the contents	Do you still have it?		
22.	Hav	ve you stored property in a storage unit or pla	·	yea	r before you filed for bankruptcy	?		
		No Yes. Fill in the details.						
	_	me of Storage Facility	Who else has or had access	De	scribe the contents	Do you still		
		Idress (Number, Street, City, State and ZIP Code)	to it? Address (Number, Street, City, State and ZIP Code)	D C.	solibe the contents	have it?		
Par	t 9:	Identify Property You Hold or Control for S	Someone Else					
23.		Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
		No Yes. Fill in the details.						
	_	vner's Name Idress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value		
Par	t 10:	Give Details About Environmental Informa	ition					
or	the p	purpose of Part 10, the following definitions	apply:					
	toxi	vironmental law means any federal, state, or l ic substances, wastes, or material into the ai ulations controlling the cleanup of these sub	r, land, soil, surface water, ground	_	•			
	Site	e means any location, facility, or property as o own, operate, or utilize it, including disposal	defined under any environmental l	aw,	whether you now own, operate, o	or utilize it or used		
		zardous material means anything an environr cardous material, pollutant, contaminant, or s		wa	ste, hazardous substance, toxic s	substance,		
₹ер	ort a	all notices, releases, and proceedings that yo	u know about, regardless of when	1 the	ey occurred.			
24.	Has	las any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
		No						
		Yes. Fill in the details.						
		Ime of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
25.	Hav	Have you notified any governmental unit of any release of hazardous material?						
		No						
		Yes. Fill in the details.						
		nme of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		

Case 19-13837-JDW Doc 1 Filed 09/23/19 Entered 09/23/19 20:08:28 Page 46 of 60 Document Debtor 1 Tracey Elane Everett Case number (if known) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tracey Elane Everett Tracey Elane Everett Signature of Debtor 2 Signature of Debtor 1 Date September 23, 2019 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:						
☐ Check if this is an amended filing						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's First Heritage	■ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of household goods	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's Guaranty Bank	☐ Surrender the property.	■ No
name:	☐ Retain the property and redeem it.	
Description of 2008 Chevrolet Impala	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
securing debt.		
Creditor's Kirk Brothers Pre-Owned	Surrender the property.	No
name:	Retain the property and redeem it.	□Yes
Description of vehilce	☐ Retain the property and enter into a Reaffirmation Agreement.	□ 163
property	☐ Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Tracey Elane Everett	Case number (if known	<u> </u>
securing debt:		_
Creditor's Nissan Motor Acceptance name: Corporation	■ Surrender the property. □ Retain the property and redeem it.	■ No
Description of 2017 Nissan Sentra property securing debt:	□ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	□ Yes —
Creditor's OneMain Financial name:	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of property securing debt: 2016 Chevrolet Impala 61000 miles	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	☐ Yes —
Creditor's Republic Finance, Inc.	■ Surrender the property. □ Retain the property and redeem it.	□No
Description of household goods property securing debt:	 □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes
Creditor's Tower Loan of Grenada	■ Surrender the property.	□No
name: Description of household goods property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you liste in the information below. Do not list real estate leases. U You may assume an unexpired personal property lease	d in Schedule G: Executory Contracts and Unexpir Inexpired leases are leases that are still in effect; the	ne lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property: Lessor's name:		☐ Yes
Ecoco o name.		⊔ NO

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Deb	otor 1	Tracey Elane Everett	Case number (if known)
	scriptior perty:	n of leased	☐ Yes
Des	sor's na scriptior perty:	ame: n of leased	□ No □ Yes
Lessor's name: Description of leased Property:			□ No □ Yes
Lessor's name: Description of leased Property:			□ No □ Yes
Und	er pena	Sign Below alty of perjury, I declare that I have indicate that is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
X	Trac	racey Elane Everett ey Elane Everett ture of Debtor 1	Signature of Debtor 2
	Date	September 23, 2019	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-13837-JDW Doc 1 Filed 09/23/19 Entered 09/23/19 20:08:28 Desc Main Document Page 54 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Mississippi

In re	Tracey Elane Everett		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR D	EBTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	y, or agreed to be paid	l to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	965.00	
	Prior to the filing of this statement I have received			315.00	
	Balance Due		\$	650.00	
2.	335.00 of the filing fee has been paid.				
3. ′	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. ′	Γhe source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	n unless they are men	nbers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the nar				
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
1	a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credited d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hor	ement of affairs and plan which ors and confirmation hearing, a educe to market value; ex ons as needed; preparatio	ch may be required; and any adjourned he cemption planning	arings thereof;	
7.]	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions o any other adversary proceeding.			es, relief from stay actions or	
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement for	or payment to me for	representation of the debtor(s) in	
S	eptember 23, 2019	/s/ Tarik Johnso	n		
	ate	Tarik Johnson 1 Signature of Attorn JOHNSON & JO 35 FIRST STREI POST OFFICE E Grenada, MS 38	00354 ney HNSON ET OX 1044 902-1044 Fax: (662) 226-078	6	

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United States Bankruptcy Court Northern District of Mississippi

Not the in District of Wississippi					
In re	Tracey Elane Everett		Case No.		
		Debtor(s)	Chapter	7	
VERIFICATION OF CREDITOR MATRIX					
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.					
Date:	September 23, 2019	/s/ Tracey Elane Everett			
		Tracey Elane Everett			

Signature of Debtor

American Cash 1742 Commerce Street Grenada, MS 38901

Armstrong & Associates P.O. Box 1787 Mobile, AL 36633

Baptist Memorial Hospital P.O. Box 17127 Memphis, TN 38187

C-Spire Wireless 1018 Highland Colony Parkway Suite 300 Ridgeland, MS 39157

C-Spire Wireless 3900 Lakeland Drive Suite 300 Pearl, MS 39208

Capital One Bankruptcy Claims Servicer P.O. Box 30285 Salt Lake City, UT 84130-0285

Carson Smithfield, LLC P.O. Box 9216 Old Bethpage, NY 11804

Cash Depot 1756 D South Commerce Street Grenada, MS 38901

CB1 P.O. Box 7429 Missoula, MT 59807-7429

CCS P.O. Box 607 Norwood, MA 02062 CCS Payment Processing P.O. Box 55126 Boston, MA 02205

Comenity Bank/Goody's Bankruptcy Dept. P.O. Box 182125 Columbus, OH 43218-2125

Community Choice 1302 Sunset Drive Suite B2 Grenada, MS 38901

Community Choice Financial Dept 757 P.O. Box 4115 Concord, CA 94524

Credit One Bank
P.O. Box 98873
Las Vegas, NV 89193

Downtown Finance, Inc. 237 S. Main Street Grenada, MS 38901

Fast Pace Urgent Care Clinic P.O. Box 306244 Nashville, TN 37230

First Heritage 1320 B. Sunset Drive Grenada, MS 38901

Frontline Asset Strategies 2700 Snelling Ave. N. Ste 250 Roseville, MN 55113

Frost-Arnett Collection P.O. Box 198988 Nashville, TN 37219-8988

Grenada County Circuit Court P.O. Box 1517 Grenada, MS 38902-1517

Grenada County Justice Court 16 First Street Grenada, MS 38901

Guaranty Bank 1324 Sunset Drive Suite C Grenada, MS 38901

Kirk Brothers Pre-Owned P.O. Box 2360 Grenada, MS 38902

LVNV Funding, LLC P.O. Box 10497 Greenville, SC 29603-0584

MediQuik Clinic P.O. Box 1607 Grenada, MS 38902-1607

Merrick Bank P.O. Box 9211 Old Bethpage, NY 11804

Money Tyme Financial 1221 Sunset Drive Grenada, MS 38901

Nissan Motor Acceptance Corporation Bankruptcy Department P.O. Box 660366 Dallas, TX 75266-0366

Nissan Motor Acceptance Corporation Bankruptcy Department P.O. Box 660360 Dallas, TX 75266-0360 OneMain Financial 363 East Monroe Grenada, MS 38901

Rapid Cash 254 South Main Street Suite A Grenada, MS 38901

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